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SECRETARY OF THE SENATE 11 QCT 14 PM 5: 10

FORM 3 AND DISBURSEMENTS For An Authorized Committee					Or	ffice Use Only
NAME OF COMMITTEE (in		R PRINT ▼	Example over the	e: If typing, type	12FE4M5	
Friends of Pat	Toomey	1111		<u> </u>		
ADDRESS (number and Check if difference than previous reported. (A) 2. FEC IDENTIFIC C C0046104	iferent usly Alexa	▼		NEW (N) OR	VA 222 VA 223 STATE AMENDED	ZIP CODE STATE ▼ DISTRICT
(a) Quarterly R April 15 July 15 Octobe January	PORT (Choose One eports: 5 Quarterly Report (Quarterly Report (Quarterly Report (Quarterly Report (31 Year-End Report (TER))	(b) 12- (1) (c) 30-	Day PRE-Election on Day POST-Election	tion Report for the nary (12P) vention (12C) M 1	General (120) Special (128)	in the PA State of
5. Covering Period	M M /	01 / Y Y 201	Y Y 1	through	09 30 / 30 /	2011
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Lisa Lisker						
Signature of Treasure	er <i>Lisa Lisker</i>	La 9	ation may subje	ct the person sign	Date 10	/ 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Office Use Only						FEC FORM 3 (Revised 02/2003)